

RESTAURANTS & INSTITUTIONS

***** ALL FOR SDC
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NUTRITION Whose Job Is It?

.....
QUICK TIPS
TO MARKETING
HEALTHFUL
FOODS



Will Food
Courts
Survive
The Retail
Downturn?

UNCOMMON WAYS ◀ TO PREPARE FIVE COMMON FRUITS

.....
PLUS:
Product Catalog
Cold Drink Ideas
Steamer Ovens
.....

MORE INSIDE!
SEE PAGE 4



A CAHNERS PUBLICATION

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40 R&I EXCLUSIVE: THE GREAT ONGOING DIET DEBATE

Should you care what your customers eat? Is it a matter of legislating labels, or choosing someone to play nutrition cop? *R&I's* Exclusive offers different points of view—from the American Cancer Society and National Institutes of Health, concerned about the link between diet and disease, and from operators who are concerned about giving customers the food they want.

109 SOUND ADVICE ON IMAGE-BUILDING

Musical offerings can help set the tone for an operation as much as its food and service. Our Focus tells how to use music to target the kinds of patrons you want; how volume and tempo affect atmosphere; and how to get the most sound for your music dollars.

118 THE LANGUAGE OF LIGHT MENUS

Here's a challenge for operators: Describe the healthful foods on the menu

so patrons translate them not as diet food, but as good tasting, good-for-you food. This message is delivered superbly around the country, as *R&I* discovers ways astute operators are turning more customers on to healthful options through the power of menu suggestion.

142 ABOUT THE COVER: UNCOMMON WAYS WITH COMMON FRUITS

Some fruits know no season—and no end of uses. Our Food feature harvests ideas for year-round pairings of apples, oranges, bananas, pears and grapes with meats and vegetables. Appeal to diners' appetites for wholesomeness with uncommon desserts that use these common fruits. The time is ripe to check out our recipes and storage tips.

156 COLD SPECIALTY DRINKS POUR IT ON

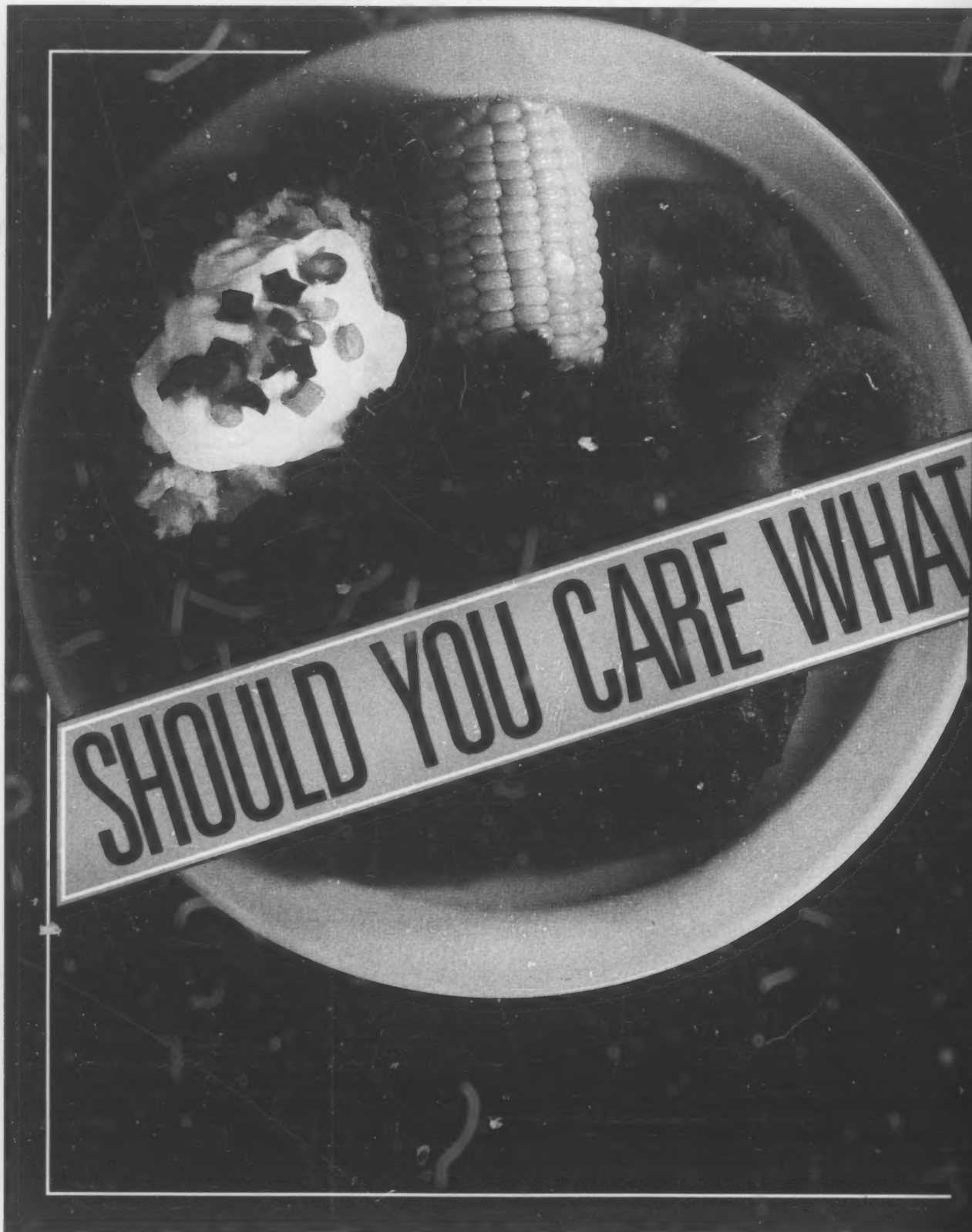
Patrons like to experiment with unusual flavor combinations and be visually dazzled by the drinks they order. This issue's Product Know-How shows operators how to do both with recipes for refreshing cocktails and mocktails that are profit builders, too.



FOOD 142
Pears in paradise:
plated on a field
of greens with
asparagus and
fresh herbs.



R&I EXCLUSIVE



&RESTAURANTS INSTITUTIONS



YOUR CUSTOMERS EAT?

HEALTH & NUTRITION

Diet might increase the risk of disorders that account for more than two-thirds of all U.S. deaths.

continued from page 41

unsaturated fats and high-density lipoproteins.

Some of this new clinical approach can be put down to post-'80s puritanism. But much is also due to the growing body of evidence suggesting a real link between diet and disease—much of it produced by the federal government. In July 1988, a ground-breaking report from the Surgeon General's of-

"Diet can influence long-term health more than any other action you can take."
—C. Everett Koop, former

fice named overeating America's top dietary problem, replacing nutritional deficiency. Of 2.1 million Americans who died in '87, nearly 1.5 million died of some ailment that could be associ-

ated with diet, the report found.

"What we eat may affect our risk for several of the leading causes of death for Americans, notably coronary heart disease, stroke, atherosclerosis, diabetes and some types of cancer," the report said. "These disorders now account for more than two-thirds of all deaths in the United States." At a press conference introducing the report, then-Surgeon General C. Everett Koop said, "If you are among the two out of three Americans who do not drink or smoke excessively, your choice of diet can influence your long-term health prospects more than any other action you might take."

More recent research by the American Cancer Society suggests that diet alone might be a factor in as many as 35% of all cancers, and recommends that Americans reduce their fat consumption, eat more foods rich in vitamins A and C and high in fiber, and consume greater amounts of what are

known as the cruciferous vegetables: broccoli, cauliflower, Brussels sprouts and cabbage.

Studies such as these culminated last fall in a new set of dietary guidelines

"I'm in business to give people what they want. I'm not a doctor." —Richard Melman, Lettuce Entertain You Enterprises, Chicago

from the Departments of Agriculture and Health and Human Services. The new document targets specific reductions in dietary fat (from an average of 37% of total calorie consumption down to 30%) and in the average proportion of daily calories from saturated fat (from 17% down to 10%). It also sets a recommended number of daily servings of fruits, vegetables and

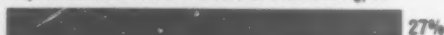
continued on page 52

BY 2000: GET HARMFUL HABITS DOWN...

The U.S. Department of Health and Human Services has set these goals for reducing disease factors in the U.S. population by the turn of the century.

■ 1985-88 ■ 2000

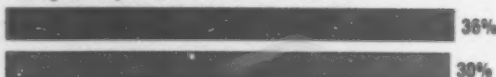
Population with blood cholesterol over 240mg/dL



Average saturated fat intake as % of calories



Average dietary fat intake as % of calories



Overweight adults as % of population

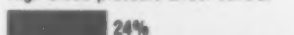


... AND HEALTHFUL HABITS UP

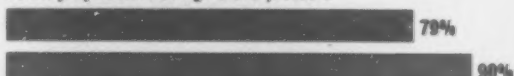
The same agency—in consultation with 300 health organizations across the country—wants to foster the following good habits in the American food consumer.

■ 1985-88 ■ 2000

High blood pressure under control



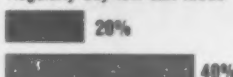
Actively try to control high blood pressure



Avoid salt at the table



Regularly buy low-salt foods



HEALTH & NUTRITION

AVAILABLE INFORMATION

Menu Item

Ingredient

Calories

Fat (grams)

Protein (grams)

Carbohydrate (grams)

Sodium (mg)

Cholesterol (mg)

Fiber (grams)

Iron (mg)

Vitamin A (IU)

Vitamin C (mg)

Vitamin E (IU)

Vitamin K (IU)

Vitamin B1 (mg)

Vitamin B2 (mg)

Vitamin B3 (mg)

Vitamin B5 (mg)

Vitamin B6 (mg)

Vitamin B12 (mg)

Vitamin D (IU)

Vitamin F (mg)

Vitamin H (mg)

Vitamin I (mg)

Vitamin J (mg)

Vitamin K (mg)

Vitamin L (mg)

Vitamin M (mg)

Vitamin N (mg)

Vitamin O (mg)

Vitamin P (mg)

Vitamin Q (mg)

Vitamin R (mg)

Vitamin S (mg)

Vitamin T (mg)

Vitamin U (mg)

Vitamin V (mg)

Vitamin W (mg)

Vitamin X (mg)

Vitamin Y (mg)

Vitamin Z (mg)

Vitamin AA (mg)

Vitamin AB (mg)

Vitamin AC (mg)

Vitamin AD (mg)

Vitamin AE (mg)

Vitamin AF (mg)

Vitamin AG (mg)

Vitamin AH (mg)

Vitamin AI (mg)

Vitamin AJ (mg)

Vitamin AK (mg)

Vitamin AL (mg)

Vitamin AM (mg)

Vitamin AN (mg)

Vitamin AO (mg)

Vitamin AP (mg)

Vitamin AQ (mg)

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Vitamin BV (mg)

Vitamin BW (mg)

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Vitamin CB (mg)

Vitamin CC (mg)

Vitamin CD (mg)

Vitamin CE (mg)

Vitamin CF (mg)

Vitamin CG (mg)

Vitamin CH (mg)

Vitamin CI (mg)

Vitamin CJ (mg)

Vitamin CK (mg)

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Vitamin CM (mg)

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Vitamin IZ (mg)

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Vitamin JB (mg)

Vitamin JC (mg)

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Vitamin JJ (mg)

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Vitamin PR (mg)

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Vitamin UC (mg)

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Vitamin UE (mg)

Vitamin UF (mg)

Vitamin UG (mg)

Vitamin UH (mg)

Vitamin UI (mg)

Vitamin UJ (mg)

Vitamin UK (mg)

Vitamin UL (mg)

Vitamin UM (mg)

Vitamin UN (mg)

Vitamin UO (mg)

Vitamin UP (mg)

Vitamin UQ (mg)

Vitamin UR (mg)

Vitamin US (mg)

Vitamin UT (mg)

Vitamin UU (mg)

Vitamin UV (mg)

Vitamin UW (mg)

Vitamin UX (mg)

Vitamin UY (mg)

Vitamin UZ (mg)

Vitamin VA (mg)

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Two-thirds of chains offer printed nutrition material.

THE NEED TO KNOW

Since the early 1980s, consumer advocate groups such as Public Voice and the Center for Science in the Public Interest have asked Congress to require foodservice operations to list the ingredient and nutritional content of menu items. While the industry opposes mandatory labeling, an ever-growing number of operators are voluntarily complying.

As of January 1991, 78% of chain operators have nutrition information available for customers, according to a National Restaurant Association survey. About three-quarters offer data relating to menu ingredients. Approximately 80% of the survey respondents have these details available through corporate headquarters. Two-thirds have printed material about nutrition in units; 35% have ingredient listings at unit sites. Another 25% of chain operators report having either a toll-free telephone number or wall posters listing nutrition and ingredients.

But the controversy continues. CSPI complained after a March 1990 survey that voluntary compliance varied widely among five major chains. In that case, its test of 60 stores in nine states revealed that one chain had nutritional information available in 83% of its outlets; another, in none.

Harried operators balk at becoming nutritional cops forcing customers to eat their broccoli.

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grains—all this in a positive tone that stresses dietary dos rather than don'ts.

RESTAURANTS' RESPONSIBILITY

But what sounds positive in the halls of government can seem awfully confining on the cooking line. The new emphasis on the diet-disease link has rebounded onto restaurants. This is understandable, since about 43% of total food spending goes for meals eaten away from home. (That figure worked out to \$156 billion in 1990.) Last fall, the National Academy of Sciences' Institute of Health recommended that full-service restaurants be required to give patrons a complete nutritional

breakdown of their standardized menu.

The National Restaurant Association's response was instantaneous. Such requirements, a spokesperson said, would be creatively restrictive to independent chefs, unfeasible for chains and a financial burden to all.

Some operators—already under pressure to turn a profit and keep up with the public's mercurial tastes—have balked at the notion of becoming nutritional cops, charged with making sure customers eat their broccoli. Many espouse a kind of nutritional laissez faire, relying on the wisdom of the patron to know what he or she needs. "I don't feel it's my responsibility to

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TRACKING THE FAT IN FAST FOOD

Limiting fat intake to approximately 30% of daily calories is tough for frequent fast-food customers, as this breakdown of selected items shows. (Nutritional data taken from documents recently acquired from restaurants.)

Menu item	Calories	Fat* (grams)
MCDONALD'S		
Quarter Pounder	410	20.7
Big Mac	521	32.4
McChicken sandwich	490	28.6
Lean Deluxe	310	10
BURGER KING		
Whopper	628	36
Hamburger Deluxe	322	17
BK Broiler	379	18
WENDY'S		
Big Classic	470	25
Chicken Sandwich	430	19
HARDEE'S		
Big Deluxe Burger	500	30
Big Roast Beef	300	11
Chicken Fillet	370	13
Steak Biscuit	521	30.4
Chicken Biscuit	447.5	25.1
KENTUCKY FRIED CHICKEN		
Original Recipe (2 pc.)	429	23.8
Extra Crispy (2 pc.)	546	33.6
Lite 'n Crispy (2 pc.)	341	18.9
ARBY'S		
Regular Roast Beef	353	14.8
Super Roast Beef	501	22.1
Chicken Breast Sandwich	493	25
Roast Chicken Club	610	33

*Includes both saturated and unsaturated fats.

HEALTH & NUTRITION

The AIWF report recommends tracking diet over several days rather than by individual meals.

FOOD FOR THOUGHT

How much do consumers know about what constitutes a good, healthy diet? *R&I* recently administered a moderately difficult American Dietetic Association quiz to 50 employees at Cahners Publishing offices in Des Plaines, Ill. The quiz asked simple questions such as whether an ounce of Cheddar cheese has more saturated fat than 2 tablespoons of peanut butter (the cheese does), or whether running a mile burns more calories than walking a mile (they're the same). (For the entire quiz and answers, see Jan. 23 issue of *R&I*, page 34.)

The response to this unscientific survey—the average score was 65%, or barely passing—supports what experts have concluded: namely, that the typical American diner is no longer completely nutritionally illiterate—only somewhat ignorant. A 1990 Food and Drug Administration survey concluded that 80% of all retail food shoppers have a “functional understanding” of terms such as cholesterol, calcium, preservatives and sodium.

But familiarity with terms doesn't mean grasping concepts. A 1990 Gallup survey for the ADA shows 40% of consumers don't know the marbling in red meat is fat. And almost 68% don't know cholesterol is found only in animal products.

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serve healthy food,” says Richard Melman, founder of Chicago-based Lettuce Entertain You Enterprises. “A number of years ago, I did feel it was a real responsibility, and I tried twice and failed both times. I'm in business to give people what they want. The smart operator knows that 10% of the people want healthy choices, and he provides them. But I'm not a doctor.”



“It's just not my concern what shape my customers' diets are in,” says one Midwestern operator of hot-dog stands who does not wish to be named. “This whole business is built on choice. Customers want a whole range of things, depending on their tastes, their moods and their wallets. You do your best to provide as much of that range as you can, then you stand back and let them choose. If people want burgers and shakes, I've got them. If they want grilled fish or a low-cal salad, I'll sell that to them. If they want sprouts, they have to go somewhere else.”

But, especially at the upscale end of the dining spectrum, more and more operators are acknowledging some need to formulate menu items with an eye to their nutritional value. They're still not pushing Brussels sprouts, but many are seeking substitutes for ingredients that a great number of diners probably should cut back on. At Nosmo King in New York, partner Scott Posner uses no dairy products in his entrees, except the occasional special cheeses. Desserts contain some dairy, but many are sweetened with rice or maple syrup instead of white sugar. And there's no red meat at all on the menu.

“Obviously, we are not monitoring our customers' diets,” says Posner. “It's not the restaurateur's responsibility to know what they're consuming on

a one-to-one basis. But we [restaurants] are 100% responsible for providing a completely nutritious meal.”

For a joint project with the American Cancer Society, Gielisse modified his restaurant's signature pecan-breaded catfish by replacing some of the high-fat nuts with a portion of bran flakes and substituting apple cider for apple jack in the sauce. Notwithstanding his high opinion of roast pork and mashed potatoes, Gielisse is willing to go looking for healthful replacements for fats and oils. “When modifying the menu, we are conscious of how many sauces we do with cream as opposed to vegetable purée or sauces with citrus and fruit vinegars.”

“The public now really puts itself in the hands of the chef,” Gielisse says. “There's a big trust level there. I get a lot of people in here who are conscious of their cholesterol levels and just want a piece of plain fish. They ask me if I can do it for them. If they call and say they don't want any olive oil or butter, I'll eliminate that for however many people are at that table. We're an 80-seat restaurant and we've established a regular clientele, so I'll go out of my way to accommodate their needs.”

FREE WILL AND FRENCH FRIES

Such customization is at least possible in a white-tablecloth setting, where



high-income, nutritionally informed diners can control their intake with a simple talk to the chef. But advocacy groups such as the Center for Science in the Public Interest complain that those same basic tools—understanding, information and choice—are often withheld from the much larger audience that patronizes only midscale and fast-food restaurants. Too few of

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HEALTH & NUTRITION

Advocacy groups say chain patrons lack the powers of understanding, information and choice.

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these customers, they say, are empowered with a working knowledge of what good nutrition is and how it translates into the menu down at their local pizza place or coffee shop.

And while healthful food is finding its way onto chain menus around the nation, it is by no means everywhere. "I was traveling across Colorado looking for a place to eat late at night," says ADA President Mary Abbott Hess. "I went into a Denny's with a 24-hour menu and almost everything on it was fried. You could get soup or salad, but in this day and age to have french fries as the only starch is ridiculous."

The most moderate of these groups stop short of demanding mandatory nutritional labeling. The ADA, for example, has called on restaurants to volunteer information on calories, protein, carbohydrates, fats (including saturated fats), cholesterol, sodium and fiber—but only for those items promoted as healthful options. Privately, Hess says she sees no reason why chains, with their highly standardized,

highly stable menus, should not be able to make such information available.

Advertising further complicates the question of choice; free will becomes a problematic concept when billions of dollars are deployed behind prime-time TV campaigns to sway the purchase decision. In the first six months of 1990, the top 10 restaurant chains spent \$638 million on advertising—much of it targeted to specific splinter markets predisposed to fast food, such as children, teens and minorities.

Minorities pose a special dilemma because their particular health problems seem to be closely linked to diet. National Institutes of Health statistics show that almost half of black women and one-third of black men exceed their normal body weight by 20% or more, compared with about one-fourth of white men and women. Hispanic men are 2.5 times more likely to develop diabetes than non-Hispanic men, and blacks are 40% more likely to suffer high blood pressure than whites.

"I keep reading where fast-food ex-

ecutives say their menus are healthy when part of a balanced diet," says Ellen Charters Tower, a registered dietitian in Newark, N.J. "But in many low-income neighborhoods they [fast-food restaurants] are the diet of choice for people who can afford it. Fast food is what they think of as good food. And for lack of better nutritional knowledge, it's what they think of as healthy

"Nutritionists have a scientific bent, but they eat, too. [They know] the pleasure in food." —Jan Weimer, food writer

food, too. Fast-food chains need to provide healthful selections within their menus, not just tell people to go elsewhere for the good stuff."

IS PEACE AT HAND?

Of course, chains of all kinds are providing nutritious options and information in greater and greater quantities. Fast-food chains in particular have caught the scent of incremental sales from items with the healthful-food halo, and they are likely to roll as many of these as their menu boards can hold. Last year, Oak Brook, Ill.-based McDonald's delivered a one-two punch by building up its healthful menu with items from low-fat shakes to the Lean Deluxe burger, now in test, and with an expanded program of informational booklets, posters and tray liners giving nutritional analyses of its menu. The wide expectation is that if McDonald's does these things, other chains will find it worth their while to catch up.

Not everyone in the nutrition camp is ready to make peace with the quick-service chains. ADA President Hess points to deception in much nutritional data. "A single-serving package of chicken salad with dressing holds 2 ounces, but they do an analysis based on a half-ounce," she says. "Who are the other three people sharing my chicken salad? I don't like it when people play games with customers. That's

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CHAINS BOARD THE NUTRITION BANDWAGON

A growing number of foodservice chains are accommodating the public's nutritional preferences, according to a recent National Restaurant Association survey of both quick-service and family-dining restaurants.

Menu item	1989
Decaffeinated coffee	76%
Entree salads and/or salad bars	71
Skinless poultry items	NA
Reduced-or low-calorie salad dressing	71
Margarine	NA
Grilled chicken sandwich	52
Whole-grain breads or muffins	NA
Fresh fruit (including on salad bars)	29
Decaffeinated soda	NA
Low-fat frozen yogurt	29
Low-fat/low-cholesterol mayonnaise	NA
Low-fat/low-calorie fruit-based dessert	NA
Egg substitutes	NA
Salt substitutes	NA

Note: Not all items were surveyed in 1989.
Source: National Restaurant Association.

HEALTH & NUTRITION



Brand-name chains make school foodservice more marketable.

BRANDED FOODS IN SCHOOL

One of the biggest problems at school foodservice operations is getting students to believe that the food served is decent quality. To gain students' trust and keep them on campus at lunchtime, directors are bringing in branded items. At the Minneapolis School District, Foodservice Director Jo Ellen Miner is testing both Pizza Hut and Subway products.

"Nutrition is a concern, but it is very difficult to get students to eat food that is good for them," says Miner. "Maybe the Pizza Hut product is a little higher in fat, but there has to be a balance. If we are feeding students one meal a day for 170 days a year, that is about 15% of the food they eat during a year. So you must look at the branding program with perspective. It has been good for the school's public relations and keeps more students on campus."

As for teaching children to develop healthy eating habits, Miner says her program is in no financial position to provide the necessary educational components. "For too many years, school foodservice has been seen as a stepchild of the district," says Miner. "Diet affects children's ability to learn, but educators never perceive nutrition as a necessary part of educational program."

Psychological pleasures of food are as important as nutritional value, says a new diet philosophy.

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dirty, unfair and insulting."

Nutritional marketing is having a spillover effect outside the fast-food arena in midscale dining, as chains such as Minneapolis-based Country Kitchen redesign menus to highlight dishes low in calories, sodium or cholesterol. Even Howard Johnson's is testing flavors of ice milk to add to its original list of 28 ice cream flavors. And buffet concepts such as Fresh Choice and Restaurants Unlimited's Zoopal are tapping a strong niche market for fresh, healthful dining at a low price. "Good nutrition and value are closely linked," says Martin Culver, president of Santa Clara, Calif.-based Fresh Choice. "Value isn't just a quantity of food in front of you for a reasonable price, but also its quality and nutritional value. We are banking on the fact that people will demand higher quality at a reasonable price."

BEYOND FEAR OF FOOD

Perhaps the most hopeful development on the diet front was symbolized last October, when the American Institute of Wine and Food (AIWF) brought 50 chefs, nutritionists, anthropologists, food editors and cookbook writers together for a three-day symposium on food and nutrition. Attendees included fine-dining notables such as Bradley Ogden of Lark Creek Inn in San Francisco and Julia Child; the sci-



ence contingent included Dr. Wayne Calloway, an endocrinologist at George Washington University, Washington, D.C., and Johanna Dwyer, director of the Frances Stern Nutrition Center at the New England Medical Center, Boston.

The end result was a report outlining a new way for cooks, dietitians and consumers to look at food: with common

sense. Stipulating that there are no "good" or "bad" foods, the group recommends that diners track their food over a period of several days rather than by individual dishes or meals.

For nutritionists, this means recognizing that everything, pork and mashed potatoes included, can be part of an intelligent diet, if eaten in moderation and balanced with low-fat, low-



cholesterol foods at an ensuing meal. Food's social and psychological value is given equal weight as its power to fuel the body. "This wasn't a concession on the nutritionists' part," says Jan Weimer, a Los Angeles-based food writer and one of the meeting's coordinators. "Nutritionists have a scientific bent, but they eat, too. The importance of taste and pleasure in food was already there for them."

Chefs and restaurant owners, on the other hand, should recognize their role in combating the epidemic of poor eating in America, the report says. They should use a diversity of high-quality raw materials of optimal nutritional value, putting taste above appearance and reserving fats for dishes where their use makes a big difference in flavor and texture. They should also try to comply with the aforementioned USDA guidelines on reducing fats, saturated fats and cholesterol, and should make these basic contents known about the dishes they serve.

What's really new about this more forgiving approach to the nutrition argument is the revelation that all parties to the debate have valid points to make about food. No one is made a scapegoat for the nation's poor diet, and all sides are given partial responsibility for correcting it, educating consumers into a new, more benevolent view of what food can do to, and for, their lives. **RST**

ACTION EXPRESS

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